

# PRINTER RUSH

(PTO ASSISTANCE)

Application : 10574961

Examiner : Boesen

GAU : 1648

From: J. Black

Location: IDC FMF FDC

Date: 9/30/08

Tracking #: eprint10574961 Week Date: 9/15/08

| DOC CODE                            | DOC DATE | MISCELLANEOUS                                |
|-------------------------------------|----------|--|
| <input type="checkbox"/> 1449       | _____    | <input type="checkbox"/> Continuing Data     |
| <input type="checkbox"/> IDS        | _____    | <input type="checkbox"/> Foreign Priority    |
| <input type="checkbox"/> CLM        | _____    | <input type="checkbox"/> Document Legibility |
| <input type="checkbox"/> IIFW/FWCLM | _____    | <input type="checkbox"/> Fees                |
| <input type="checkbox"/> SRFW       | _____    | <input checked="" type="checkbox"/> Other    |
| <input type="checkbox"/> DRW        | _____    |  |
| <input type="checkbox"/> OATH       | _____    |  |
| <input type="checkbox"/> 312        | _____    |  |
| <input type="checkbox"/> SPEC       | _____    |  |

*NDA 9/15/08*

[RUSH] MESSAGE:

*Original claims 10, 24 and 27 depend on  
canceled claim 2.*

*Please resolve.*

[XRUSH] RESPONSE:

Please change claim dependency in claim 10 from "as claimed in claim 1 or 2" to recite: "as claimed in claims 1 or 5".  
 Please change claim dependency in claim 24 from "as claimed in claims 1 and 2" to recite: as claimed in claims 1 and 5.  
 Please change claim dependency in claim 27 from "as claimed in claims 1 and 2" to recite: "as claimed in claims 1 and 5."

INITIALS: AB

EXAMINER: PUBS contacts -- for DESIGNS: Don Fairchild, 703-308-9250 x126; for ALL OTHER FILES:  
 Bernadette Queen, 703-308-9250 x121

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.